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CONFIRMATION NO. 2417

<b>SERIAL NUMBER</b> 10/070,271	<b>FILING OR 371(c) DATE</b> 06/13/2002 <b>RULE</b>	<b>CLASS</b> 602	<b>GROUP ART UNIT</b> 3764	<b>ATTORNEY DOCKET NO.</b> 22748/1
<b>APPLICANTS</b> Shane Willard Nickson, Sheffield, GBN, UNITED KINGDOM;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/GB00/04288 11/08/2000				
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 9926599.3 11/11/1999				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/> Allowance Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>STATE OR COUNTRY</b> GBN	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 13
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 21710				
<b>TITLE</b> An Ankle and Foot Orthosis				
<b>FILING FEE RECEIVED</b> 1020	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	